

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS**

In Re: KIMBERLY STRABEVY § Case No.: 08-20273
§
§
§
§
§
Debtor(s) §

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, Chapter 13 Trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 08/04/2008.
- 2) This case was confirmed on 11/19/2008.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was completed on 03/13/2012.
- 6) Number of months from filing to the last payment: 43
- 7) Number of months case was pending: 49
- 8) Total value of assets abandoned by court order: NA
- 9) Total value of assets exempted: \$ 166,780.00
- 10) Amount of unsecured claims discharged without payment \$ 15,628.55
- 11) All checks distributed by the trustee to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$ 33,000.07
Less amount refunded to debtor	\$ 449.07
NET RECEIPTS	\$ 32,551.00

Expenses of Administration:

Attorney's Fees Paid through the Plan	\$ 2,279.00
Court Costs	\$.00
Trustee Expenses and Compensation	\$ 2,018.73
Other	\$.00

TOTAL EXPENSES OF ADMINISTRATION

\$ 4,297.73

Attorney fees paid and disclosed by debtor

\$ 921.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ORTHAPAEDIC ASSOCIAT	UNSECURED	454.00	NA	NA	.00	.00
ARGENT HEALTHCARE FI	UNSECURED	215.00	NA	NA	.00	.00
ASPEN MASTERCARD	UNSECURED	573.00	NA	NA	.00	.00
COMMUNITY HOSPITAL	UNSECURED	631.00	NA	NA	.00	.00
COMMUNITY HOSPITAL A	UNSECURED	75.00	NA	NA	.00	.00
COMMUNITY HOSPITAL O	UNSECURED	94.00	NA	NA	.00	.00
EMERGENCY MEDICAL SE	UNSECURED	51.00	NA	NA	.00	.00
HENRIQUE E SCOTT MD	UNSECURED	408.00	408.84	408.84	267.19	.00
IDS	UNSECURED	74.00	NA	NA	.00	.00
INGALLS MEMORIAL HOS	UNSECURED	433.00	NA	NA	.00	.00
MUNSTER MEDICAL RESE	UNSECURED	87.00	801.83	801.83	524.02	.00
NAVIT V BAROT MD	UNSECURED	73.00	NA	NA	.00	.00
NICOR GAS	UNSECURED	886.00	NA	NA	.00	.00
NIPSCO	UNSECURED	271.00	NA	NA	.00	.00
PATHOLOGY ASSOCIATES	UNSECURED	130.00	NA	NA	.00	.00
QUESTAR SALT LAKE NO	UNSECURED	111.00	NA	NA	.00	.00
ST CATHERINES HOSPIT	UNSECURED	365.00	NA	NA	.00	.00
ST JAMES ANESTHESIA	UNSECURED	110.00	NA	NA	.00	.00
ST MARGARET MERCY HO	UNSECURED	2,500.00	NA	NA	.00	.00
ST MARGARET MERCY HO	UNSECURED	784.00	NA	NA	.00	.00
STEPHEN ANDERSON	UNSECURED	501.00	NA	NA	.00	.00
VILLAGE OF LANSING	UNSECURED	250.00	250.00	250.00	163.48	.00
CITIMORTGAGE INC	SECURED	109,000.00	93,903.62	.00	.00	.00

<u>Scheduled Creditors:</u>						
<u>Creditor Name</u>	<u>Class</u>	<u>Claim Scheduled</u>	<u>Claim Asserted</u>	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Int. Paid</u>
CITIMORTGAGE INC	SECURED	NA	22,028.54	9,666.72	9,666.72	.00
CNAC IL 115	SECURED	3,650.00	.00	3,650.00	3,650.00	1,171.82
WATER COATS CREDIT	SECURED	11,800.00	.00	.00	.00	.00
KATHLEEN CULLICK	OTHER	.00	NA	NA	.00	.00
LAKE IMAGING LLC	UNSECURED	NA	24.00	24.00	15.50	.00
MUNSTER RADIOLOGY GR	UNSECURED	NA	273.69	273.69	178.86	.00
PATIENTS 1ST ER MEDI	UNSECURED	NA	372.00	372.00	243.11	.00
MUNSTER MEDICAL RESE	UNSECURED	NA	801.83	.00	.00	.00
MCSI/RMI	UNSECURED	NA	2,950.00	2,950.00	1,927.91	.00
LVNV FUNDING	UNSECURED	NA	11,241.75	11,241.75	7,346.82	.00
CREDIT ACCEPTANCE CO	SECURED	NA	.00	.00	.00	.00
CITIMORTGAGE INC	OTHER	NA	NA	NA	.00	.00
CREDIT ACCEPTANCE CO	UNSECURED	NA	4,740.17	4,740.17	3,097.84	.00

Summary of Disbursements to Creditors:

	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Int. Paid</u>
Secured Payments:			
Mortgage Ongoing	.00	.00	.00
Mortgage Arrearage	9,666.72	9,666.72	.00
Debt Secured by Vehicle	3,650.00	3,650.00	1,171.82
All Other Secured	.00	.00	.00
TOTAL SECURED:	13,316.72	13,316.72	1,171.82
Priority Unsecured Payments:			
Domestic Support Arrearage	.00	.00	.00
Domestic Support Ongoing	.00	.00	.00
All Other Priority	.00	.00	.00
TOTAL PRIORITY:	.00	.00	.00
GENERAL UNSECURED PAYMENTS:	21,062.28	13,764.73	.00

Disbursements:

Expenses of Administration	\$ 4,297.73
Disbursements to Creditors	\$ 28,253.27
TOTAL DISBURSEMENTS:	\$ 32,551.00

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 09/12/2012

/s/ Tom Vaughn
Tom Vaughn, Chapter 13 Trustee

STATEMENT : This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.